In re Application of:

NO.

Docket No. 03500.014706.

KAZUHITO OHASHI

Application No.: 09/639,082

Filed: August 16, 2000

For:

IMAGE INPUT APPARATUS

Examiner: Y.K. Aggarwal

Art Unit: 2615

November 28, 2005

Mail Stop Amendment

Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Second Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

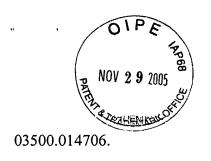
| CLAIMS AS AMENDED | | | | | | | | |
|-------------------|--|-------|--|-------------------------|------------------|-------------------|--|--|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE | | |
| TOTAL CLAIMS | * 5 | MINUS | ** 38 | = 0 | x \$25 \$50 | \$0.00 | | |
| INDEP. CLAIMS | * 1 | MINUS | *** 9 | = 0 | x \$100 \$200 | \$0.00 | | |
| Fee for Mu | \$0.00 | | | | | | | |
| | \$0.00 | | | | | | | |

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

| | Verified Statement claiming small entity status is enclosed, if not filed previously. |
|---|---|
| | A check in the amount of \$ is enclosed. |
| | Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed. |
| X | Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed. |
| | A check in the amount of \$ to cover the fee for a month extension is enclosed. |
| | A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed. |
| X | Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below. |
| | Respectfully submitted, |
| | Jennifer A. Reda Attorney for Applicant Registration No.:57,840 |

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200

NY_MAIN 537419v1



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| In re A | Application of: |) | |
|-----------------------------|-----------------------|---|-------------------------|
| | • | : | Examiner: Y.K. Aggarwal |
| KAZU | THITO OHASHI |) | |
| | | : | Art Unit: 2615 |
| Application No.: 09/639,082 | | | |
| | | : | |
| Filed: August 16, 2000 | |) | |
| | _ | : | |
| For: | IMAGE INPUT APPARATUS |) | November 28, 2005 |

Mail Stop: Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

SECOND AMENDMENT

Sir:

Supplemental to the Amendment field on October 19, 2005, please further amend the above-identified application, as follows. The amendments to the specification are reflected in the listing beginning on page 2, amendments to the claims are reflected in the listing beginning on page 5, comments regarding the amendments to the figures begin on page 8, and the Remarks begin on page 9.